



## Health and Safety Assessment Report of Findings

Child Care Business Name \_\_\_\_\_ County # \_\_\_\_\_ NACCRRRA # \_\_\_\_\_

**Dates** of Assessment: Room # \_\_\_\_\_ Room # \_\_\_\_\_ Room # \_\_\_\_\_ Room # \_\_\_\_\_ Room# \_\_\_\_\_ Room# \_\_\_\_\_

**Type** of Assessment<sup>1</sup>: Room # \_\_\_\_\_ Room # \_\_\_\_\_ Room # \_\_\_\_\_ Room # \_\_\_\_\_ Room# \_\_\_\_\_ Room# \_\_\_\_\_

Type of Child Care: ☐ Center with Full License ☐ New Center  
☐ Center with Provisional License  
☐ Registered Child Development Home ☐ Non-registered Home

### HEALTH AND SAFETY WRITTEN POLICY.<sup>2</sup>

Health Policy Scoring Key	No Policy Exists	Poor	Meets DHS Rules	Good	Meets CFOC Standards
	1	2	3	4	5
<b>Health Policy</b>					<b>Score</b>
1. Care of mildly ill or temporarily disabled children					
2. Cleaning and sanitizing environment, toys, equipment					
3. Emergency preparedness					
4. Employee health					
5. Exclusion of ill children					
6. Hand washing for infants, children, and employees					
7. Inclusion of children with special health or developmental needs					
8. Medication administration, authorization, documentation, storage, and handling					
9. Physical activity for all children					
10. Transporting children safely					
<b>Total Score<sup>3</sup></b>					<b>_____/50 possible</b>
Health Policy Item Findings:					
Areas of Concern:					
Recommendations:				Date: _____	
CCNC: _____				Date: _____	
Update on progress on meeting recommendations				Date: _____	
CCNC signature: _____				Date: _____	
All Health Policy recommendations completed				Date: _____	
Yes <input type="checkbox"/> No <input type="checkbox"/> Comments: CCNC signature: _____					

<sup>1</sup> Types of assessment: **I** = Initial, **RA6** = Repeat Assessment 6 months after the initial assessment, **RA12** = Repeat Assessment at 12 months after the initial assessment, **RA18** = Repeat Assessment at 18 months after the initial assessment, and so forth.

<sup>2</sup> The CCHC shall use the Iowa Department of Human Services child care regulations and the reference text, "Caring for Our Children, National Health and Safety Performance Standards, Guidelines for Out-of-Home Child Care. 2<sup>nd</sup> Edition. 2002.

<sup>3</sup> Health Policy Scoring: A score of 45 or above is considered Very Good. A score between 40 - 44 is considered Good. A score between 35 - 40 is Passing. A score of 34 or below is considered Poor.

**Findings, Areas of Concern, and Recommendations****SANITATION**

Item Findings:

Areas of Concern:

Recommendations:

Date: \_\_\_\_\_

CCNC: \_\_\_\_\_

Update on progress on meeting recommendations

Date: \_\_\_\_\_

CCNC signature: \_\_\_\_\_

All recommendations completed

Date: \_\_\_\_\_

Yes ☐ No ☐

Comments:

CCNC signature: \_\_\_\_\_

**Nutrition and Food Safety**

Item Findings:

Areas of Concern:

Recommendations:

Date: \_\_\_\_\_

CCNC: \_\_\_\_\_

Update on progress on meeting recommendations

Date: \_\_\_\_\_

CCNC signature: \_\_\_\_\_

All recommendations completed

Date: \_\_\_\_\_

Yes ☐ No ☐

Comments:

CCNC signature: \_\_\_\_\_

**MEDICATION**

Item Findings:

Areas of Concern:	
Recommendations:	Date: _____
CCNC: _____	
Update on progress on meeting recommendations	Date: _____
CCNC signature: _____	
All recommendations completed Yes <input type="checkbox"/> No <input type="checkbox"/> Comments:	Date: _____
CCNC signature: _____	

EMERGENCY PREPAREDNESS	
Item Findings:	
Areas of Concern:	
Recommendations:	Date: _____
CCNC: _____	
Update on progress on meeting recommendations	Date: _____
CCNC signature: _____	
All recommendations completed Yes <input type="checkbox"/> No <input type="checkbox"/> Comments:	Date: _____
CCNC signature: _____	

INFANT SLEEP AND POSITIONING	
Item Findings:	
Areas of Concern:	

Recommendations:	Date: _____
CCNC: _____	
Update on progress on meeting recommendations	Date: _____
CCNC signature: _____	
All recommendations completed	Date: _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	
Comments:	
CCNC signature: _____	

<b>INDOOR SAFETY</b>
Item Findings:
Areas of Concern:
Recommendations:
CCNC: _____
Update on progress on meeting recommendations
CCNC signature: _____
All recommendations completed
Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:
CCNC signature: _____

<b>OUTDOOR SAFETY</b>
Item Findings:
Areas of Concern:
Recommendations:
CCNC: _____

Update on progress on meeting recommendations	Date: _____
CCNC signature: _____	
All recommendations completed Yes <input type="checkbox"/> No <input type="checkbox"/>	Date: _____
Comments:	
CCNC signature: _____	

ENVIRONMENTAL HEALTH
Item Findings:
Areas of Concern:
Recommendations: _____  CCNC: _____
Update on progress on meeting recommendations
Date: _____
CCNC signature: _____
All recommendations completed Yes <input type="checkbox"/> No <input type="checkbox"/>
Comments:
CCNC signature: _____

### HEALTH AND SAFETY ASSESSMENT SCORE SUMMARY<sup>4</sup>

#### HEALTH AND SAFETY<sup>5</sup> PRACTICE AND PROCEDURES

Instructions: The health and safety assessment tool is designed for all questions to be answered in the affirmative if the child care provider is following proper health and safety standards. The CCHC shall evaluate each item listed. The CCHC may use the letter **Y** for items achieved and the letter **N** for items not achieved.<sup>6</sup> During a repeat assessment the letter **I** may be used to indicate improvement. Numerical scoring: Y = 2 points, N = 0 points, I = 1 point.

Health Policy <sup>7</sup> 50 points possible	Score:					
<b>Tabulate the score for each room</b>						
<b>Ages of children in the room</b>						
Sanitation Practices - 15 items						
Nutrition and Food Safety - 8 items						

<sup>4</sup> Refer to the instructions when calculating the score for each section and the total score for the full assessment. Using a numerical score is optional for child care businesses *not* participating in the Iowa Quality Rating System.

<sup>5</sup> All items based on *Caring for Our Children, National Health and Safety Performance Standards, Guidelines for Out-of-Home Child Care*. 2<sup>nd</sup> Edition. 2002.

<sup>6</sup> There are a few items that may appropriately be recorded as NA or not applying. Example: if the child care provider does not care for infants, then all items pertaining to infants may be recorded as NA.

<sup>7</sup> Health policy is scored for the whole facility, not scored by individual rooms.

Medication - 7 items					
Emergency Preparedness - 10 items					
Infant Sleep and Positioning - 5 items					
Indoor Safety - 4 items					
Outdoor Safety <sup>8</sup> - 14 items					
Environmental Health - 7 items					
Total Score for Each Room					

### 1. Initial Assessment Completed

Owner/Director Signature	Date	CCNC Signature <sup>9</sup>	Date

### 2. Owner/Director in Process of Completing Recommendations

Owner/Director Signature	CCNC Signature <sup>10</sup>	Date

### 3. All Recommendations Completed

Owner/Director Signature	CCNC Signature <sup>11</sup>	Date

Child Care Nurse Consultant name \_\_\_\_\_

Verbal report given to director/owner: Yes ☐ date given \_\_\_\_\_ No ☐

Written report given to director/owner: Yes ☐ date given \_\_\_\_\_ No ☐

Director/owner requests consultation, training, or technical assistance: Yes ☐ date scheduled \_\_\_\_\_ No ☐

Report sent to licensing consultant: Yes ☐ date sent \_\_\_\_\_ No ☐

Report sent to RCCNC: Yes ☐ date sent \_\_\_\_\_ No ☐

List resources or materials given to the child care business owner:

<sup>8</sup> Outdoor Safety may be scored for the whole facility or may be scored by room if each room has a separate outdoor play/learning area or certain rooms use only specified portions of the outdoor play/learning area.

<sup>9</sup> The CCNC signature indicates initial completion of the assessment and an initial report of findings were given to the child care business.

<sup>10</sup> The CCNC signature indicates the child care business has **corrected a minimum of 50%** of the found hazards and has a written plan for resolving the remaining hazards (with no recommendations refused).

<sup>11</sup> The CCNC signature indicates the child care business **corrected all** found hazards and recommendations.